

EXHIBIT A

Log of _____ [Name of Defendant]'s Documents
Taken Off Site for Imaging/Scanning/Photocopying

ATTORNEY WORK PRODUCT

PRIVILEGED and CONFIDENTIAL

Box Bates Stamp Start	Box Bate Stamp End	Box #	Date Box # Checked Out of Defendant's Document Facility	Date Box # Returned to Defendant's Document Facility

_____ Plaintiffs' Representative Responsible for Documents

_____ Name and Address of Imaging/Scanning/Photocopying Facility
